| Substitute for form 1449/PTO | | | | Complete if Known | | |
|--|---|----|---|------------------------|-------------------|--|
| | | | | Application Number | 09/724,319 | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) | | | | Filing Date | November 27, 2000 | |
| | | | | First Named Inventor | Schenk, Dale B. | |
| | | | | Art Unit | 1649 | |
| | | | | Examiner Name | Ballard, Kimberly | |
| Sheet | 1 | of | 1 | Attorney Docket Number | 15270J-004743US | |

| | | NON PATENT LITERATURE DOCUMENTS | |
|------------------------|------|--|----------------|
| Examiner Initials * | | | T ² |
| | 3-49 | U.S. Application No. 09/322289, Office Action mailed 11/04/2008. | |
| | 3-51 | U.S. Application No. 10/858855 Office Action mailed 12/12/2008. | |
| | 3-48 | U.S. Application No. 11/244678, Office Action mailed 09/23/2008. | |
| | 3-50 | U.S. Application No. 11/245916, Office Action mailed 10/31/2008. | |

| Examiner Signature | Date Considered | |
|-----------------------|--------------------|--|

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.